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Northern District Of Illinois Western Division

Trustee's Final Report

In Re: ALRICK S. WILLIAMS, JR. & LISA G. WILLIAMS Case Number: 07-71848

1090 INGRAM ROAD ROCKFORD, IL 61108 SSN-xxx-xx-0682 & xxx-xx-6617

Case filed on: Plan Confirmed on:

8/3/2007 11/26/2007

D Dismissed

Total funds received and disbursed pursuant to the plan: \$11,354.00

Detail of Disbursements below:

Claim #		Claimed by ne Creditor	Allowed by the Court	Principal Paid	Interest Paid
000	ATTORNEY GARY C FLANDERS Total Legal	3,500.00 3,500.00	3,500.00 3,500.00	3,500.00 3,500.00	0.00 0.00
002	FISHER & SHAPIRO	0.00	0.00	0.00	0.00
004 007	FORD MOTOR CREDIT INTERNAL REVENUE SERVICE	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00
007	INTERNAL REVENUE SERVICE	0.00	0.00	0.00	0.00
013	CAPITAL ONE	0.00	0.00	0.00	0.00
014	CAPITAL ONE	0.00	0.00	0.00	0.00
030 039	NORTH SHORE AGENCY STATE COLLECTION SERVICE	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00
039	SWEDISH AMERICAN HOSPITAL	0.00	0.00	0.00	0.00
	Total Legal	0.00	0.00	0.00	0.00
006	INTERNAL REVENUE SERVICE Total Priority	3,345.00 3,345.00	3,345.00 3,345.00	1,901.66 1,901.66	0.00 0.00
999	ALRICK S. WILLIAMS, JR.	0.00	0.00	0.00	0.00
999	Total Debtor Refund	0.00	0.00	0.00	0.00
001	EVERHOME MORTGAGE	31,142.70	103.66	103.66	0.00
003	FORD MOTOR CREDIT CORP	11,288.76	11,288.76	3,535.37	1,387.71
005	OLD ORCHARD HOMEOWNERS ASSOC.	100.00	100.00	100.00	6.73
	Total Secured	42,531.46	11,492.42	3,739.03	1,394.44
009	ALRICK WILLIAMS, SR.	0.00	0.00	0.00	0.00
010	ANTHIA WILLIAMS	0.00	0.00	0.00	0.00
011 012	ROUNDUP FUNDING LLC BLACK EXPRESSIONS	137.66 0.00	137.66 0.00	0.00 0.00	0.00 0.00
012	CAPITAL ONE BANK (USA) NA	994.30	994.30	0.00	0.00
016	CAROL CARNEGIE ` ´	0.00	0.00	0.00	0.00
017	CATHEDRAL BAPTIST SCHOOL	0.00	0.00	0.00	0.00
018 019	ROUNDUP FUNDING LLC CHRISTIAN LIFE SCHOOLS	694.09 0.00	694.09 0.00	0.00 0.00	0.00 0.00
020	COMED CO	815.36	815.36	0.00	0.00
021	CROSSINGS	0.00	0.00	0.00	0.00
022	CRUSADER CLINIC	226.00	226.00	0.00	0.00
023 024	EVANNA LAUNIUS INGRID HARGROVE	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00
025	MACYS	0.00	0.00	0.00	0.00
026	NEW HORIZONS CHILDCARE	0.00	0.00	0.00	0.00
027 028	NICOR GAS NORTHERN ILLINOIS SCANNING	1,852.19 0.00	1,852.19 0.00	0.00 0.00	0.00 0.00
028	ONE SPIRIT	0.00	0.00	0.00	0.00
031	OSF ST. ANTHONY MEDICAL CENTER	0.00	0.00	0.00	0.00
032	RADIOLOGY CONSULTANTS OF ROCKFORD	0.00	0.00	0.00	0.00
033 034	ROCKFORD CARDIOLOGY ASSOCIATES ROCKFORD E A S	0.00 407.00	0.00 407.00	0.00 0.00	0.00 0.00
035	ROCKFORD INFECTIOUS DISEASE CONSULTANT		0.00	0.00	0.00
036	ROCKFORD MERCANTILE AGENCY INC	216.00	216.00	0.00	0.00
037	MUTUAL MANAGEMENT SERVICES	861.72	861.72	0.00	0.00
038 040	SWEDISH AMERICAN EMERGENCY PHYSICIANS MUTUAL MANAGEMENT SERVICES	0.00 140.50	0.00 140.50	0.00 0.00	0.00 0.00
042	SWEDISH AMERICAN HOSPITAL	0.00	0.00	0.00	0.00
043	SWEDISH AMERICAN HOSPITAL	0.00	0.00	0.00	0.00
044	SWEDISH AMERICAN HOSPITAL	0.00	0.00	0.00	0.00 0.00
045 046	SWEDISH AMERICAN HOSPITAL VERIZON	0.00 0.00	0.00 0.00	0.00 0.00	0.00
047	TSYS TOTAL DEBT MANAGEMENT	339.06	339.06	0.00	0.00
048	MUTUAL MANAGEMENT SERVICES	3,754.22	3,754.22	0.00	0.00
049 050	CAVALRY PORTFOLIO SERVICES LLC MUTUAL MANAGEMENT SERVICES	770.36 706.79	770.36 706.79	0.00 0.00	0.00 0.00
550		100.13	100.19	0.00	0.00

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051	MUTUAL MANAGEMENT SERVICES	970.75	970.75	0.00	0.00
	Total Unsecured	12,886.00	12,886.00	0.00	0.00
	Grand Total:	62,262.46	31,223.42	9,140.69	1,394.44

Total Paid Claimant: \$10,535.13 Trustee Allowance: \$818.87

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liablility on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

Percent Paid Unsecured:

/s/ Lydia S. Meyer Lydia S. Meyer, Trustee

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 03/26/2009 B

0.00

By /s/Heather M. Fagan